

RPB CHALLENGE GRANT

2025 Guidelines and Instructions

DEADLINES*

January 10, 2025 (awarded in June)
July 1, 2025 (awarded in December)

*If the deadline falls on a weekend or holiday, please consider the deadline to be

*If the deadline falls on a weekend or holiday, please consider the deadline to be the following business day.

DESCRIPTION

RPB Challenge Grants: \$300,000 payable over four (4) years, \$75,000 a year upon approval of two-year substantive progress report.

Challenge Grants encourage the growth of newly emerging eye research programs or recently-appointed department heads. The Challenge Grant is designed to enhance a department's environment and capability to conduct vision research, to facilitate collaborative studies of the visual system, and to attract researchers to the department. Challenge Grants can continue for up to four years upon approval of two-year substantive progress report. After four years, Chairs will then be invited to apply for an Unrestricted Grant.

Challenge Grants may only be used for the following:

- salaries (new or existing research faculty, not administrative support staff)
- equipment (new purchase)
- > small pilot research in vision science
- research support (including lab supplies, consumables, data gathering, statistical analysis, etc.)
- travel related to research

Departments will be required to submit a substantive progress report after two years. This report will be competitively reviewed and subsequent third and fourth payments are contingent upon approval of this report.

Grant disbursement will be made electronically. <u>All RPB grants must remain free of institutional overhead and indirect costs.</u>

Should the Chair step down from the chairmanship during Challenge Grant period, RPB may provide one additional payment year before the grant is terminated. An acting or interim Chair cannot reapply for continued support.

ELIGIBILITY

- The Challenge Grant is intended for ophthalmology departments which have not received RPB departmental (Unrestricted or Challenge) support in the last four (4) years.
- Permanent, full-time ophthalmology department Chairs at university-connected medical schools may apply for the RPB Challenge Grant. Interim or acting Chairs cannot apply for the Challenge Grant.
- Chairs should speak with RPB to discuss their department's eligibility (contact MariaClaudia Lora-Montano at mlora@rpbusa.org). We suggest that new Chairs be active for at least six months but preferably twelve months prior to submitting an application. If rejected the Chair must wait two years before reapplying.
- An existing base of high-quality NEI or vision-related research grants is a primary requirement.
- Department must be in an upward trajectory as evidenced by personnel, space allocations, grants/funding, publications, and collaborations.

ELIGIBILITY continued

- Strong faculty and professional development programs must be in place in the department.
- Chair's realistic strategic plan must have the potential to take the department to the next level.
- Commitment by the medical school to match the RPB Challenge Grant.

REPORTING REQUIREMENTS

All reporting requirements related to research conducted with the Challenge Grant:

- Summary report (annually, due each November the award is active).
- Bibliography (annually, due each January).
- Photo (annually, due each January the award is active).
- Financial report (annually, due each January the award is active).
- Substantive two-year progress report due:
 - March 1, 2027, for applications submitted January 2025.
 - o September 1, 2027, for applications submitted July 2025.

If awarded, information on fulfilling the above requirements will be sent under separate cover. Failure to properly report and credit research funded by RPB places the grant at risk for termination.

APPLICATION SUBMISSION

RPB will accept applications and supporting documentation via the password-protected page on RPB's website that has been established for application submission. Please note only **one** (1) **upload action**, with application and all applicable supporting documentation, will be accepted per department. This upload must be received **no later than 11:59pm ET on the deadline date.**

- Go to www.rpbusa.org to log in
- Enter the password: Research (not case sensitive)
- > Click on the "Upload Grant Application" button to go to the upload form.
- Once you are on the upload form, enter your email address in the "From email" field.
- Upload your application and supporting documentation by browsing for them on your computer using the "Browse" button on the form.
- Use the Message box to add additional information, if any.
- > Before clicking "SendThisFile" to send your submission, check that the information is complete.
- Click the "SendThisFile" button to send your application and supporting documentation.

DOCUMENTATION SUBMISSION

The single upload action must include **only four (4)** separate documents:

- Signed, completed application form, in a Word document. Make sure ALL SIGNATURES are included!
- 3. Chair's letter, Dean's letter, biosketches, non-profit determination: As a **single PDF** (not a PDF portfolio), this document must include the below, **in this order**:
 - a. A statement from the Chair. Statement must be on letterhead, signed, and addressed to "RPB's Review Committees." Limit twelve (12) pages; font size 10-point or higher. Avoid condensed typeface. Statement must include in this order:

DOCUMENTATION SUBMISSION continued

- i. Brief paragraph on the history and development of the ophthalmology department.
- ii. Detailed description of the department's current status, including review of:
 - 1. Current research programs and interests, including the department's top researchers and/or researchers in department's primary research areas. Include patent disclosures, if any, including revenue-generating patents and how patents translate to treatment.
 - 2. Faculty and professional development programs, including information on faculty conversion from Kawards to R-awards.
 - 3. Department's diversity, equity, and inclusion efforts. (These efforts are taken very seriously by RPB. Ensure this information is included in your submission.)
 - 4. Facilities, including equipment and technology, for clinical and basic ophthalmic research within the department.
 - 5. Department's most important collaborations/relationships between other departments/centers/etc., within the institution as well as outside of institution, including grants, papers and/or activities (include relationships with basic science departments).
- iii. Provide actual (not projected) figures that depict the department's trajectory over the last four years. These figures can be captured in a simple chart, broken out by year (example: 2021, 2022, 2023, 2024 and category). Categories should include personnel (research and clinical), space allocation, grants/funding, publications, and collaborations within the institution and outside of the institution. Supporting narrative can be included to explain fluctuations from year to year.
- iv. Description of vision research (outside of ophthalmology department) at the institution, including review of:
 - 1. Current inter-departmental and inter-institutional collaborations, with description of top vision researchers from other departments and institutions.
 - 2. Available facilities, including equipment and technology, for vision research.
 - 3. Institution's commitment to vision research as a whole, including funding (internal institutional and external philanthropic), space allocation, and personnel.
- v. Comprehensive vision statement for the department's future over the next four years. This statement must provide specific benchmarks for each, with analysis of:
 - 1. Expansion of existing programs and development of new programs and initiatives, including collaborations both internal and external to the institution. Describe how the department will leverage these collaborations.
 - 2. Research and training objectives for department and faculty, including a broad-based mentoring plan for the department's junior faculty.
 - 3. Faculty recruitment plans.
 - 4. Diversity, equity, and inclusion plans for the department. (These efforts are taken very seriously by RPB. Ensure this information is included in your submission.)
 - 5. Facility expansion, including new equipment and technology.
 - 6. Capitalizing on the strengths of other departments in the institution and the institution as a whole.
 - 7. Financial viability and sustainability of these goals and plans.
 - 8. Specific description of how RPB funds will be used in the next four (4) years.
- vi. Provide any additional information, not specifically requested above, which is unique to your department and/or institution, which may affect RPB's review of your application (i.e., industry contracts, intellectual property, high-impact awards, high-impact presentations, etc.) which may help "build your case" and may aid in RPB's review of your application.
- b. A separate statement from the Dean of the Medical School. Statement must be on letterhead, signed, and addressed to "RPB's Review Committees." Limit two (2) pages; font size 10-point or higher. Avoid condensed typeface. This statement should include institution's commitment to the department's current activities and future goals, including funding (internal institutional and external philanthropic), space allocation, personnel, and in-kind contributions. In the statement, the institution must confirm a commitment to at least match RPB's Challenge Grant amount.

DOCUMENTATION SUBMISSION continued

- b. NIH-style biosketches for each full-time faculty member, including Chair. **DO NOT INCLUDE BIOSKETCHES FOR CLINICAL FACULTY**. Limit five (5) pages for each biosketch. Based on the Master Faculty List, biosketches must be grouped by primary research area and then in alphabetical order by faculty member's last name. Each faculty member, including Chair, must adhere to current NIH format and instructions. However, for *Section A, Personal Statement*, provide a summary of the faculty member's current research/work in the department rather than describing the faculty member's research/work as it pertains to this grant request. Biosketches submitted in any other format will be disqualified. Except for clinical faculty, biosketches included in the submission must mirror the Master Faculty List.
- c. Institution's IRS 501c(3) Letter of Determination and Federal Employment Identification Number.
- 4. Master Faculty List for Challenge Grant: The fourth document is the Master Faculty List of full-time faculty, including Chair AND CLINICAL FACULTY, in Excel, with primary appointments in ophthalmology as of application deadline. Do not include individuals with secondary appointments in the ophthalmology department or ophthalmology department residents. Faculty list must be grouped by primary research area and then in alphabetical order by faculty member's last name. Include clinical faculty, in alphabetical order, at the end of the faculty listing. Use only the template provided and follow the instructions on the template. Do not alter formatting. Document should print exactly how the template appears. Excluding clinical faculty, the Master Faculty List must mirror the biosketches included in the submission.
- 5. Grant Support List: The fifth document is the Grant Support List of all current and pending NEI and non-NEI funding for the department and the institution, in Excel. Tables to be completed in the document include:
 - Table A: Ophthalmology Department's Current NEI Grant Support
 - Table B: Ophthalmology Department's Current Non-NEI Grant Support
 - Table C: Ophthalmology Department's Pending Grant Support
 - Table D: Institution's Current NEI Grant Support (researchers outside ophthalmology department)
 - Table E: Institution's Current Vision-Related Grant Support (researchers outside ophthalmology department)

Tables A, B, and C should be used to properly complete the summary of the grant support section on page 1 of the application. Do not leave a table blank. If not applicable, indicate N/A.

Materials received after the deadline will not be accepted and will render the submission incomplete. Incomplete submissions are not forwarded to RPB's review committees and are automatically declined. If the deadline falls on a weekend or holiday, proposals will be accepted the first following business day.

Do not alter application format. Do not include manuscripts, reprints, or any information not required by RPB. **Notify** RPB if there are any changes to the status of major pending grants or faculty members or recruits after the application has been submitted.

Granting of the awards is at the full discretion of RPB; we reserve the right to not make any award, based on the submissions.

Any questions, please contact MariaClaudia Lora-Montano at 646-892-9564 or mlora@rpbusa.org.

APPLICATION PREPARATION

We've included information below to assist you in preparing and completing RPB's Challenge Grant Application.

Do not change formatting. Please keep pagination the same. If necessary, abbreviate answers to fit allotted space. Please provide responses in Arial 9 (font/size). Do not change the font/size of the actual questions.

Institution Information:

- > Enter name of institution.
- Enter name of ophthalmology Chair and ophthalmology Research Director and Medical School Dean; include degrees.

Status:

- Enter Year as YYYY when current Chair was appointed.
- Enter Year as YYYY when ophthalmology achieved departmental status.
- Enter number of full-time faculty (MD/PhDs, MDs, PhDs, ODs, MPHs, others). Only note full-time faculty members with primary appointments in ophthalmology; include Chair. Do not duplicate MD/PhDs under MDs or PhDs. Do not add residents/fellows in training programs under 'others.' Provide residents/fellows information in response to the next question.
- Enter information to the right for indicating number of residents/fellows/postdocs in the department and in training programs (see example below):

Residents 10 Fellows 5 Post-Docs 7

- Enter number of full-time planned recruits (MD/PhDs, MDs, PhDs, and others) for the next four (4) years. Do not duplicate MD/PhDs under MDs or PhDs.
- ➤ Enter number of basic scientists who have secondary appointments in ophthalmology. This number should reflect those individuals who have primary appointments in other departments and have secondary appointments in ophthalmology.
- Enter square footage of administrative space, clinical space, and basic and clinical research space of ophthalmology department on campus. Do not include space in other departments or affiliated facilities.

Summary:

- Limit response to fifteen (15) lines or less.
- In layman's terms, highlight the most important scientific aspects of the department's research activities and, from the Chair's letter, summarize/encapsulate the Chair's vision statement for the department.

Ophthalmology Department's Current Grant Support:

- Listing must only include grants administered by the Ophthalmology Department AND where the PI is a full-time faculty member of the Ophthalmology Department.
- Summarize NEI and non-NEI current support. Take information from Tables A and B in the Grant Support List.
- Enter total number of grants from a specific source and for a specific type (NEI/R01, NEI/R21, etc.). Group similar sources together for Industry, Foundation/Private, Academic, Other, etc. to save space (see example below):

Total Number	Source	Туре
14	NEI	R01/R21/etc.
1	Industry	N/A
3	Foundation/Private	N/A
5	Academic	N/A
2	Other	N/A

- Enter Annual Direct Costs and Total Grant Support (include direct and indirect costs in Total Grant Amount). Total Grant Amount should reflect the entire grant period. Identify subcontracts, supplements, and no-cost extensions.
- Enter Years as YY-YY. Provide actual years of grant(s), e.g., 24-27, not total number of years, e.g., 4.

Ophthalmology Department's Pending Grant Support:

- Listing must only include grants administered by the Ophthalmology Department AND where the PI is a full-time faculty member of the Ophthalmology Department.
- Summarize NEI and non-NEI pending support. Take information from Table C in the Grant Support List.
- Enter total number of grants from a specific source and for a specific type (NEI/R01, NEI/R21, etc.). Group similar sources together for Industry, Foundation/Private, Academic, Other, etc. to save space (see example below):

Total Number	Source	Туре
14	NEI	R01/R21/etc.
1	Industry	N/A
3	Foundation/Private	N/A
5	Academic	N/A
2	Other	N/A

- Enter Annual Direct Costs and Total Grant Support (include direct and indirect costs in Total Grant Amount). Total Grant Amount should reflect the entire grant period. Identify subcontracts, supplements, and no-cost extensions.
- Enter Years as YY-YY. Provide actual years of grant(s), e.g., 24-28, not total number of years, e.g., 4.

For RPB Use Only:

This section is for RPB Use Only. DO NOT ENTER ANY INFORMATION.

Top Ten Publications of Ophthalmology Department:

- When completing this section, consider this a documentation of the department's best research in the last four (4) years. Among other things, RPB will take into account the journal's impact factor as well as the number of citations for each publication. We understand that a recently released or cutting-edge publication may have fewer citations.
- In bibliography format, list top ten publications from the last four (4) calendar years from the department's current primary, full-time faculty. Underline your ophthalmology faculty in each listing. Original articles only do not include reviews. Include one (1) short sentence after each listing as to why the publication is significant. Add pages as needed.

Top Ten Publications of Researchers within Institution doing Vision-Related Research:

- When completing this section, consider this a documentation of the institution's best vision research in the last four (4) years for researchers outside of the ophthalmology department. Among other things, RPB will take into account the journal's impact factor as well as the number of citations for each publication. We understand that a recently released or cutting-edge publication may have fewer citations.
- In bibliography format, list top ten publications from the last four (4) calendar years from the institution's current faculty (those outside of the ophthalmology department) doing vision-related research. Underline the institution's vision researchers in each listing. Original articles only do not include reviews. Include one (1) short sentence after each listing as to why the publication is significant. Add pages as needed.

Publications:

- Ophthalmology department's publications for last full calendar year from current, full-time faculty with primary appointments in ophthalmology only. Indicate calendar year. Provide number of peer-reviewed publications; number of other publications; total number of publications (number of peer-reviewed and other publications should equal total number of publications). Provide number of RPB-cited publications, if any.
- Pophthalmology department's publications for last full four (4) calendar years from **current**, **full-time faculty with**primary appointments in ophthalmology only. Indicate calendar year period. Provide number of peer-reviewed publications; number of other publications; total number of publications (number of peer-reviewed and other publications should equal total number of publications). Provide number of RPB-cited publications, if any.

Agreement:

Place X to the right of your selection for the following (see example below):

Master Faculty List submitted lists full-time faculty with primary appointments in Ophthalmology Department: Yes X No Space allocations indicated are accurate: Yes X No

Chair and Medical School Dean to sign.

Contact Information:

- Enter contact information for ophthalmology Chair; include degrees.
- ➤ Enter name and contact information of Research Grant Administrator responsible for RPB applications. Include address if different than Chair's and include degrees.
- Enter contact information for Director of Research and Dean of the Medical School; include degrees.

Master Faculty List: (Excel)

- Provide only full-time faculty, including the Chair, with primary appointments in ophthalmology as of application deadline. Please alert RPB if there are any changes to the department's faculty after the application is submitted. Do not include individuals with secondary appointments in the ophthalmology department or ophthalmology department residents. Instructions on clinical faculty are below.
- Enter institution name, last name of ophthalmology Chair, and year submitting application (YYYY).
- Enter full-time faculty name/degrees, title within ophthalmology department and, if applicable, title and secondary department for faculty member.
- Provide primary research area for each faculty; research area wording should be kept to a minimum (1-3 words at most) and should correspond to the primary research areas of the department identified in the Chair's statement. If faculty's primary research area is not among those identified in the Chair's statement, note All Other with the research area next to it. Include clinical faculty, in alphabetical order, at the end of the faculty listing and indicate Clinical in the Primary Research Area.
- Indicate whether the faculty has current funding for sources noted.
- > Provide number of peer-reviewed publications for each faculty throughout career and last four (4) years; indicate N/A for no publications.
- Group by Primary Research Area; then sort alphabetically by last name of faculty. Biosketches, **except for clinical faculty**, must be submitted in the same order as listed on the Master Faculty List.
- Though Biosketches are not required for clinical faculty, please complete all columns on the Master Faculty List for the clinical faculty.
- Do not alter template; document should print exactly how the template appears.

Grant Support List: (Excel)

Complete all tables (A through E). Do not leave a table blank. Indicate N/A if the table is not applicable.

Table A – Ophthalmology Department's Current NEI Grant Support:

- Listing must only include grants administered by the Ophthalmology Department AND where the PI has a primary appointment and is a full-time faculty member of the Ophthalmology Department.
- Do not include individuals who have secondary appointments in the ophthalmology department.
- Enter total number of full-time faculty members with primary appointments in ophthalmology as **Principal Investigators** on NEI grants and the NEI type (see example below):

Total Number of Faculty	NEI Type
5	R01
4	R21

- Provide details of NEI grants with PI's last name, NEI type (e.g., R21, etc.), NEI grant number, title, annual direct costs, total grant amount (total grant amount should reflect the entire grant period), and years (YY-YY). Provide actual years of grant, e.g., 23-27, not total number of years, e.g., 4. **Group by NEI grant (R01, R21, etc.), not PI**. Identify subcontracts and supplements.
- Indicate no-cost extensions with an asterisk (*).
- Only include those awarded to the ophthalmology department. If funds have transferred with PI, list only funding and years to your department.
- Use information from this table to complete Current Grant Support on page 1 of the application form.

Grant Support List: (Excel)

Complete all tables (A through E). Do not leave a table blank. Indicate N/A if the table is not applicable.

Table B - Ophthalmology Department's Current Non-NEI Grant Support:

- Listing must only include grants administered by the Ophthalmology Department AND where the PI has a primary appointment and is a full-time faculty member of the Ophthalmology Department.
- > Do not include individuals who have secondary appointments in the ophthalmology department.
- Enter source, type, grant number if applicable, PI last name, annual direct costs, total grant amount (total grant amount should reflect the entire grant period), and years YY-YY. Provide actual years of grant, e.g., 23-27, not total number of years, e.g., 4.
- Group by type first (Industry, Foundation, etc. with NIH grants at the top of the list), then by source of grant. Do not group by PI. Do not duplicate NEI grants listed on Table A. Grants from NIH institutes should be identified. Identify subcontracts and supplements. If funds have transferred with PI, list only funding and years to your department.
- Indicate no-cost extensions with an asterisk (*).
- Use information from this table to complete Current Grant Support on page 1 of the application form.

Grant Support List: (Excel)

Complete all tables (A through E). Do not leave a table blank. Indicate N/A if the table is not applicable.

Table C – Ophthalmology Department's Pending Grant Support (NEI and non-NEI):

- Listing must only include grants administered by the Ophthalmology Department AND where the PI is a full-time faculty member of the Ophthalmology Department.
- > Do not include individuals who have secondary appointments in the ophthalmology department.
- Enter source, type, grant number if applicable, PI last name, annual direct costs, total grant amount (total grant amount should reflect the entire grant period), and years YY-YY.
- Group by type first (with NEI grants at the top of the list, followed by other NIH grants, and then other types such as Industry, Foundation, etc., then by source of grant. Do not group by PI. Identify subcontracts, supplements, NIH institutes, and no-cost extensions.
- Use information from this table to complete Pending Grant Support on page 1 of the application form.
- Notify RPB of any status change to this listing after application submission.

Grant Support List: (Excel)

Complete all tables (A through E). Do not leave a table blank. Indicate N/A if the table is not applicable.

Table D - Current NEI Support for Researchers Within Institution:

- Provide detail of NEI grants to researchers within the institution but outside of ophthalmology department.
- Enter total number of researchers within institution as **Principal Investigators** on NEI grants awarded to their primary departments. Add the NEI type (see example below):

Total Number of Researchers	NEI Type
5	R01
4	R21

- Provide details of NEI grants with PI's last name/primary department, NEI type (e.g., R21, etc.), NEI grant number, title, annual direct costs, total grant amount (total grant amount should reflect the entire grant period), and years (YY-YY). Provide actual years of grant, e.g., 23-27, not total number of years, e.g., 4. Group by NEI type, not PI. Identify subcontracts, supplements, and no-cost extensions. If funds have transferred with PI, only list funding and years to the department.
- Indicate no-cost extensions with an asterisk (*).

Grant Support List: (Excel)

Complete all tables (A through E). Do not leave a table blank. Indicate N/A if the table is not applicable.

Table E - Current Vision-Related Support for Researchers Within Institution:

- Provide detail of vision-related (non-NEI) grants to researchers within the institution but outside of ophthalmology department. List Principal Investigators only.
- Enter source, type, grant number if applicable, PI last name/primary department, annual direct costs, total grant amount (total grant amount should reflect the entire grant period), and years YY-YY. Provide actual years of grant, e.g., 23-27, not total number of years, e.g., 4.
- For the list (Industry, Foundation, etc. with NIH grants at the top of the list), then by source of grant. Do not group by PI. Grants from NIH institutes should be identified. Identify subcontracts, supplements, and nocost extensions. If funds have transferred with PI, only list funding and years to the department.
- Indicate no-cost extensions with an asterisk (*).

MASTER FACULTY LIST TEMPLATE AND SAMPLE FOR CHALLENGE GRANT

Place Master Faculty List for Challenge Grant Excel Document Here

Place Master Faculty List **SAMPLE** for Challenge Grant Excel Document Here

GRANT SUPPORT LIST TEMPLATE AND SAMPLE FOR CHALLENGE GRANT

Place Grant Support List Excel Document Here Table A

Place Grant Support List Excel Document Here Table B

Place Grant Support List Excel Document Here Table C

Place Grant Support List Excel Document Here Table D

Place Grant Support List Excel Document Here Table E

Place Grant Support List Excel Document **Sample** Here Tables A

Place Grant Support List Excel Document **Sample** Here Tables B

Place Grant Support List Excel Document **Sample** Here Tables C

Place Grant Support List Excel Document **Sample** Here Tables D

Place Grant Support List Excel Document **Sample** Here Tables E

NIH-STYLE BIOSKETCH FORMAT AND SAMPLE

BIOGRAPHICAL SKETCH

Provide the following information for the Senior/key personnel and other significant contributors. Follow this format for each person. **DO NOT EXCEED FIVE PAGES.**

NAME:			
eRA COMMONS USER NAME (credential, e.g., age	ncy login):		
POSITION TITLE:			
EDUCATION/TRAINING (Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable. Add/delete rows as necessary.)			
INSTITUTION AND LOCATION	DEGREE (if applicable)	Completion Date MM/YYYY	FIELD OF STUDY

A. Personal Statement

A I A B 4

Briefly describe why you are well-suited for your role(s) in this project. Relevant factors may include: aspects of your training; your previous experimental work on this specific topic or related topics; your technical expertise; your collaborators or scientific environment; and/or your past performance in this or related fields, including ongoing and completed research projects from the past three years that you want to draw attention to (previously captured under Section D. Research Support).

You may cite up to four publications or research products that highlight your experience and qualifications for this project. Research products can include, but are not limited to, audio or video products; conference proceedings such as meeting abstracts, posters, or other presentations; patents; data and research materials; databases; educational aids or curricula; instruments or equipment; models; protocols; and software or netware. Use of hyperlinks and URLs to cite these items is not allowed.

You are allowed to cite interim research products. **Note:** interim research products have specific citation requirements.

Note the following additional instructions for ALL applicants/candidates:

- If you wish to explain factors that affected your past productivity, such as family care responsibilities, illness, disability, or military service, you may address them in this "A. Personal Statement" section.
- Indicate whether you have published or created research products under another name.
- You may mention specific contributions to science that are not included in Section C. Do not present or expand on materials that should be described in other sections of this Biosketch or application.
- Figures, tables, or graphics are not allowed.

B. Positions, Scientific Appointments, and Honors

List in reverse chronological order all current positions and scientific appointments both domestic and foreign, including affiliations with foreign entities or governments. This includes titled academic, professional, or institutional appointments whether or not remuneration is received, and whether full-time, part-time, or voluntary (including adjunct, visiting, or honorary). High school students and undergraduates may include any previous positions. For individuals who are not currently located at the applicant organization, include the expected position at the applicant organization and the expected start date.

List any relevant academic and professional achievements and honors. In particular:

- Students, postdoctorates, and junior faculty should include scholarships, traineeships, fellowships, and development awards, as applicable.
- Clinicians should include information on any clinical licensures and specialty board certifications that they have achieved.

C. Contributions to Science

Who should complete the "Contributions to Science" section:

All senior/key persons should complete the "Contributions to Science" section except candidates for research supplements to promote diversity in health-related research who are high school students, undergraduates, and post-baccalaureates.

Format:

Briefly describe up to five of your most significant contributions to science. The description of each contribution should be no longer than one half page, including citations.

While all applicants may describe up to five contributions, graduate students and postdoctorates may wish to consider highlighting two or three they consider most significant.

Content:

For each contribution, indicate the following:

- The historical background that frames the scientific problem;
- The central finding(s);
- The influence of the finding(s) on the progress of science or the application of those finding(s) to health or technology; and
- Your specific role in the described work.
- Figures, tables, or graphics are not allowed.

For each contribution, you may cite up to four publications or research products that are relevant to the contribution. If you are not the author of the product, indicate what your role or contribution was. Note that while you may mention manuscripts that have not yet been accepted for publication as part of your contribution, you may cite only published papers to support each contribution. Research products can include audio or video products; conference proceedings such as meeting abstracts, posters, or other presentations; patents; data and research materials; databases; educational aids or curricula; instruments or equipment; models; protocols; and software or netware. Use of hyperlinks and URLs to cite these items is not allowed.

You are allowed to cite interim research products. Note: interim research products have specific citation requirements.

You may provide a hyperlinked URL to a full list of your published work. This hyperlinked URL must be to a Federal Government website (a .gov suffix). NIH recommends using *My Bibliography*. Providing a URL to a list of published work is not required.

Descriptions of contributions may include a mention of research products under development, such as manuscripts that have not yet been accepted for publication. These contributions do not have to be related to the project proposed in this application.

BIOGRAPHICAL SKETCH

Provide the following information for the Senior/key personnel and other significant contributors. Follow this format for each person. **DO NOT EXCEED FIVE PAGES.**

NAME: Hunt, Morgan Casey

eRA COMMONS USER NAME (credential, e.g., agency login): huntmc1

POSITION TITLE: Associate Professor of Psychology

EDUCATION/TRAINING (Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable. Add/delete rows as necessary.)

INSTITUTION AND LOCATION	DEGREE (if applicable)	Completion Date MM/YYYY	FIELD OF STUDY
University of California, Berkeley	BS	05/2003	Psychology
University of Vermont	PHD	05/2009	Experimental Psychology
University of California, Berkeley	Postdoctoral	08/2013	Public Health and Epidemiology

A. Personal Statement

I am an Associate Professor of Psychology, and my research is focused on neuropsychological changes associated with substance use disorders. I have a broad background in psychology, with specific training and expertise in ethnographic and survey research and secondary data analysis on psychological aspects of substance use disorders. As PI or co-Investigator on several university- and NIH-funded grants, I laid the groundwork for the proposed research by developing effective measures of disability, depression, and other psychosocial factors relevant to older people with substance use disorders, and by establishing strong ties with community providers that will make it possible to recruit and track participants over time as documented in the following publications. In addition, I successfully administered the projects (e.g. staffing, research protections, budget), collaborated with other researchers, and produced several peer-reviewed publications from each project. As a result of these previous experiences, I am aware of the importance of frequent communication among project members and of constructing a realistic research plan, timeline, and budget. The current application builds logically on my prior work. During 2015-2016, my career was disrupted due to family obligations. However, upon returning to the field, I immediately resumed my research projects and collaborations and successfully competed for NIH support. In summary, I have the expertise, leadership, training, expertise, and motivation necessary to successfully carry out the proposed research project.

Ongoing and recently completed projects that I would like to highlight include:

R01 DA942367 Hunt (PI) 09/01/16-08/31/21

Health trajectories and behavioral interventions among older people with substance use disorders

R01 MH922731

Merryle (PI), Role: co-investigator

12/15/17-11/30/22

Physical disability, depression, and substance use among older adults

R21 AA998075 Hunt (PI) 01/01/19-12/31/21 Community-based intervention for alcohol abuse

Citations:

- 1. Merryle, R.J. & **Hunt, M.C.** (2015). Independent living, physical disability and substance use among older adults. Psychology and Aging, 23(4), 10-22.
- 2. **Hunt, M.C.**, Jensen, J.L. & Crenshaw, W. (2018). Substance use and mental health among community-dwelling older adults. International Journal of Geriatric Psychiatry, 24(9), 1124-1135.
- 3. **Hunt, M.C.**, Wiechelt, S.A. & Merryle, R. (2019). Predicting the substance use treatment needs of an aging population. American Journal of Public Health, 45(2), 236-245. PMCID: PMC9162292
- 4. Merryle, R. & **Hunt, M.C.** (2020). Randomized clinical trial of cotinine in older people with nicotine use disorder. Age and Aging, 38(2), 9-23. PMCID: PMC9002364

B. Positions, Scientific Appointments, and Honors

Positions and Scientific Appointments

2021 – Present	Associate Professor, Department of Psychology, Washington University, St. Louis, MO
2020 – Present	Adjunct Professor, McGill University Department of Psychology, Montreal, Quebec,
	Canada
2018 – Present	NIH Risk, Adult Substance Use Disorder Study Section, member
2015 – 2017	Consultant, Coastal Psychological Services, San Francisco, CA
2014 – 2021	Assistant Professor, Department of Psychology, Washington University, St. Louis, MO
2014 – 2015	NIH Peer Review Committee: Psychobiology of Aging, ad hoc reviewer
2014 – Present	Board of Advisors, Senior Services of Eastern Missouri
2013 – 2014	Lecturer, Department of Psychology, Middlebury College, Middlebury, VT
2011 – Present	Associate Editor, Psychology and Aging
2009 – Present	Member, American Geriatrics Society
2009 – Present	Member, Gerontological Society of America
2009 – 2013	Fellow, Intramural Research Program, National Institute on Drug Abuse, Baltimore, MD
2006 - Present	Member, American Psychological Association
Honors	
2020	Award for Best in Interdisciplinary Ethnography, International Ethnographic Society
2019	Excellence in Teaching, Washington University, St. Louis, MO
2018	Outstanding Young Faculty Award, Washington University, St. Louis, MO

C. Contributions to Science

1. My early publications directly addressed the fact that substance use is often overlooked in older adults. However, because many older adults were raised during an era of increased drug and alcohol use, there are reasons to believe that this will become an increasing issue as the population ages. These publications found that older adults appear in a variety of primary care settings or seek mental health providers to deal with emerging concerns about a substance use disorder. These publications document this emerging concern and guide primary care providers and geriatric mental health providers to recognize symptoms, assess the nature of the behavior, and apply the necessary interventions. By providing evidence and simple clinical approaches, this body of work has changed the standards of care for older adults with substance use disorders and will continue to provide assistance in relevant medical settings well into the future. I served as the primary investigator or co-investigator in all of these studies.

- a. Gryczynski, J., Shaft, B.M., Merryle, R., & **Hunt, M.C.** (2013). Community based participatory research with late-life substance use disorder. American Journal of Alcohol and Drug Abuse, 15(3), 222-238
- b. Shaft, B.M., **Hunt, M.C.**, Merryle, R., & Venturi, R. (2014). Policy implications of genetic transmission of alcohol and drug use in women who do not use drugs. International Journal of Drug Policy, 30(5), 46-58.
- c. **Hunt, M.C.**, Marks, A.E., Shaft, B.M., Merryle, R., & Jensen, J.L. (2015). Early-life family and community characteristics and late-life substance use. Journal of Applied Gerontology, 28(2),26-37.
- d. **Hunt, M.C.**, Marks, A.E., Venturi, R., Crenshaw, W. & Ratonian, A. (2018). Community-based intervention strategies for reducing alcohol and drug use in older adults. Addiction, 104(9), 1436-1606. PMCID: PMC9000292
- 2. In addition to the contributions described above, with a team of collaborators, I directly documented the effectiveness of various intervention models for older people with substance use disorders and demonstrated the importance of social support networks. These studies emphasized contextual factors in the etiology and maintenance of substance use disorders and the disruptive potential of networks in substance use treatment. This body of work also discusses the prevalence of alcohol and amphetamine use in older adults and how networking approaches can be used to mitigate the effects of these disorders.
 - a. **Hunt, M.C.**, Merryle, R. & Jensen, J.L. (2015). The effect of social support networks on morbidity among older adults with substance use disorders. Journal of the American Geriatrics Society, 57(4), 15-23.
 - b. **Hunt, M.C.**, Pour, B., Marks, A.E., Merryle, R. & Jensen, J.L. (2018). Aging out of methadone treatment. American Journal of Alcohol and Drug Abuse, 15(6), 134-149.
 - c. Merryle, R. & **Hunt, M.C.** (2020). Randomized clinical trial of cotinine in older people with nicotine use disorders. Age and Ageing, 38(2), 9-23. PMCID: PMC9002364
- 3. Methadone maintenance has been used to treat people with substance use disorder for many years, but I led research that has shown that over the long-term, those in methadone treatment view themselves negatively and they gradually begin to view treatment as an intrusion into normal life. Older adults were shown, in carefully constructed ethnographic studies, to be especially responsive to tailored social support networks that allow them to eventually reduce their maintenance doses and move into other forms of therapy. These studies also demonstrate the policy and commercial implications associated with these findings.
 - a. **Hunt, M.C.** & Jensen, J.L. (2013). Morbidity among older adults with substance use disorders. Journal of the Geriatrics, 60(4), 45-61.
 - b. **Hunt, M.C.** & Pour, B. (2015). Methadone treatment and personal assessment. Journal Drug Abuse, 45(5), 15-26.
 - c. Merryle, R. & **Hunt**, **M.C.** (2018). The use of various nicotine delivery systems by older people with nicotine use disorder. Journal of Aging, 54(1), 24-41. PMCID: PMC9112304
 - d. **Hunt, M.C.**, Jensen, J.L. & Merryle, R. (2020). Aging and substance use disorder: ethnographic profiles of older people with substance use disorder. NY, NY: W. W. Norton & Company.

Complete List of Published Work in MyBibliography:

https://www.ncbi.nlm.nih.gov/myncbi/1lCifFFV4VYQZE/bibliography/public/